Case: 16-10129 Document: 1 Filed: 09/14/16 Page 1 of 46

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH DAKOTA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this a amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Jason First name  Theodore Middle name  Moe Last name and Suffix (Sr., Jr., II, III)	Shawn First name  Michelle Middle name  Moe  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5699	xxx-xx-2584

Debtor 1 Jason Theodore Moe
Debtor 2 Shawn Michelle Moe

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)
	doing business as names	Business name(s)	Dusiness name(s)
		EINs	EINS
5.	Where you live		If Debtor 2 lives at a different address:
		44322 157th St. Florence, SD 57235	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Codington	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 2	Shawn Michelle M					Case number (if known)	
Par 7.		Tell the Court About ` chapter of the				see Notice Required b	y 11 U.S.C. § 342(b) for Individuals Filing for Bankrup	ntcv
	Banl	kruptcy Code you are			go to the top of page 1 a			,
	CHOC	osing to file under	☐ Chapt	ter 7				
			☐ Chapt	ter 11				
			☐ Chapt	ter 12				
			■ Chapt	ter 13				
8.	How	you will pay the fee	abo ord	out how yo	ou may pay. Typically, if your attorney is submitting you	ou are paying the fee	eck with the clerk's office in your local court for more of yourself, you may pay with cash, cashier's check, or nhalf, your attorney may pay with a credit card or chec	noney
					y the fee in installments ee in Installments (Official		tion, sign and attach the Application for Individuals to	Pay
			☐ I re	equest that is not req	at my fee be waived (You juired to, waive your fee, a	n may request this opti and may do so only if y	on only if you are filing for Chapter 7. By law, a judge your income is less than 150% of the official poverty lin in installments). If you choose this option, you must fi	ne that
							ficial Form 103B) and file it with your petition.	ii out
9.		you filed for cruptcy within the	■ No.					
		8 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to	line 12.			
			☐ Yes.	Has yo	our landlord obtained an e	viction judgment agair	nst you and do you want to stay in your residence?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial States</i> bankruptcy petition.	ment About an Eviction	n Judgment Against You (Form 101A) and file it with the	nis

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 4 of 46 Jason Theodore Moe Debtor 1 Debtor 2 **Shawn Michelle Moe** Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ☐ No. of any full- or part-time Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as **Moe Farms** an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. 44322 157th St. If you have more than one Florence, SD 57235 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. property that poses or is alleged to pose a threat ☐ Yes. What is the hazard? of imminent and identifiable hazard to

## 14. Do you own or have any

public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Deb	tor 2 Shawn Michelle M	loe			Case number (if known)
Par	5: Explain Your Efforts t	to Re	ceive a Briefing About Credit Counseling		
		Abo	out Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.  The law requires that you	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate o completion.
	receive a briefing about credit counseling before you file for bankruptcy.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificat of completion.
	If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.  I am not required to receive a briefing about credit counseling because of:  Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		To ask for a 30-day temporary waiver of the requirement attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.  I am not required to receive a briefing about credit counseling because of:  Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a		Active duty. I am currently on active military duty in a military

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 tor 2	Jason Theodore M Shawn Michelle M				Case nu	umber (if knowi	n)
Part	6:	Answer These Questi	ions for Re	porting Purposes				
16.		t kind of debts do nave?		Are your debts primarily consindividual primarily for a personated No. Go to line 16b.			e defined in 1	1 U.S.C. § 101(8) as "incurred by an
				Yes. Go to line 17.				
				Are your debts primarily busing money for a business or investn				
				☐ No. Go to line 16c.				
				☐ Yes. Go to line 17.				
			16c.	State the type of debts you owe	that are not consur	mer debts or bu	siness debts	
17.		ou filing under oter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.			
	after	ou estimate that any exempt erty is excluded and		I am filing under Chapter 7. Do yare paid that funds will be availa				xcluded and administrative expenses
administrative expenses are paid that funds will			□ No					
	be a	vailable for ibution to unsecured itors?		☐ Yes				
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000			<b>l</b> 25,001-50,000
	owe	estimate that you ?	☐ 50-99 ☐ 100-19 ☐ 200-99		□ 5001-10,000 □ 10,001-25,0			1 50,001-100,000 1 More than100,000
19.	estin	much do you nate your assets to orth?	<b>\$100,0</b>	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	I - \$50 million		1 \$500,000,001 - \$1 billion 1 \$1,000,000,001 - \$10 billion 1 \$10,000,000,001 - \$50 billion 1 More than \$50 billion
20.		much do you nate your liabilities ?	<b>\$100,0</b>	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	I - \$50 million I - \$100 million		1 \$500,000,001 - \$1 billion 1 \$1,000,000,001 - \$10 billion 1 \$10,000,000,001 - \$50 billion 1 More than \$50 billion
Part	7:	Sign Below						
For	you		I have exa	mined this petition, and I declar	e under penalty of p	perjury that the i	information p	rovided is true and correct.
				nosen to file under Chapter 7, I a tes Code. I understand the relie				Chapter 7, 11,12, or 13 of title 11, proceed under Chapter 7.
				ney represents me and I did not I have obtained and read the n				orney to help me fill out this
			I request r	elief in accordance with the cha	pter of title 11, Unite	ed States Code	, specified in	this petition.
			I understa bankruptc and 3571.	nd making a false statement, co y case can result in fines up to \$	ncealing property, oncealing property, on imprison	or obtaining moi onment for up to	ney or proper 20 years, or	rty by fraud in connection with a both. 18 U.S.C. §§ 152, 1341, 1519,
				Theodore Moe		/s/ Shawn M		e
				neodore Moe of Debtor 1		Shawn Mich Signature of D		
			Executed	September 14, 2016  MM / DD / YYYY		Executed on	September MM / DD / Y	

Debtor 1 Debtor 2	Jason Theodore I Shawn Michelle M				Cas	e number (if known)
	attorney, if you are ed by one	under Chap	ter 7, 11, 12, or 13 of title 11, l	United States Code, and	nave e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
	not represented by ey, you do not need a page.	and, in a ca		olies, certify that I have no		ledge after an inquiry that the information in the
		/s/ Terry J	. Sutton	Da	te	September 14, 2016
			Attorney for Debtor			MM / DD / YYYY
		Terry J. S	utton			
		Printed name				
		Sutton La	w Offices, PC			
		Firm name	•			
		PO Box 10	053			
		17 Second	d Ave. SW			
		Watertow	n, SD 57201-1053			
		Number, Street,	City, State & ZIP Code			
		Contact phone	605-882-3220	Email addı	ess	terry@suttonlawwtn.com
		1676				
		Bar number & S	tate			<del></del>

	in this information to identify your case:		
Del	btor 1 Jason Theodore Moe		
Del	First Name Middle Name Last Name btor 2 Shawn Michelle Moe		
(Spo	ouse if, filing) First Name Middle Name Last Name		
Uni	ited States Bankruptcy Court for the: DISTRICT OF SOUTH DAKOTA		
	se number	_	k if this is an nded filing
	ficial Form 106Sum  Immary of Your Assets and Liabilities and Certain Statistical Information		12/15
info you	as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	tt 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	235,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	106,004.27
	1c. Copy line 63, Total of all property on Schedule A/B	\$	341,504.27
Par	rt 2: Summarize Your Liabilities		
			iabilities
		Λ	
		Amou	nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	363,833.39
<ol> <li>3.</li> </ol>			•
	2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$	363,833.39
	2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ \$ \$	363,833.39
3.	2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ \$ \$	363,833.39 0.00 31,305.39
3.	2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ \$ \$	363,833.39 0.00 31,305.39
3.	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ \$ \$	363,833.39 0.00 31,305.39 395,138.78
3. Par 4. 5.	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ \$ \$	363,833.39 0.00 31,305.39 395,138.78 8,986.92
3. Par 4. 5.	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ \$ \$ \$	363,833.39 0.00 31,305.39 395,138.78 8,986.92 4,652.00
<ul><li>3.</li><li>Par</li><li>4.</li><li>5.</li><li>Par</li></ul>	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ \$ \$ \$	363,833.39 0.00 31,305.39 395,138.78 8,986.92 4,652.00
3. Par 4. 5. Par 6.	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ \$ \$ ur other so	363,833.39 0.00 31,305.39 395,138.78  8,986.92 4,652.00

Jason Theodore Moe Shawn Michelle Moe	Case number (if known)	

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,934.21

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		Case	. 10-10129	Doci	ument. 1	Filed. 09/14/10	Page 1	.0 01 46		
Fill	in this inform	ation to identify	your case and th	nis filing	g:					
Deb	otor 1	Jason Theo	dore Moe							
	_	First Name		Name		Last Name				
	otor 2 use, if filing)	Shawn Mich		Name		Last Name				
Uni	ted States Ban	kruptcy Court for	the: DISTRICT	OF SOL	JTH DAKOTA	<u> </u>				
Cas	se number					_				Check if this is an
										amended filing
<b>∩</b> f	ficial For	m 106A/E	3							
			_							
		e A/B: P								12/15
think	it fits best. Be	as complete and	accurate as possible	e. If two	married people	an asset fits in more than on e are filing together, both are e top of any additional page	e equally resp	onsible for su	pplyir	ng correct
	ver every questi		anaon a coparato ci			o top of any additional page	o, milo your i	iumo una oao	o mam	or (ii kilowil).
Part	1: Describe E	ach Residence, B	uilding, Land, or Otl	her Real	Estate You Ov	vn or Have an Interest In				
1. D	o you own or na	ive any legal or ec	juitable interest in a	iny resia	ence, building,	, land, or similar property?				
	No. Go to Part	2.								
	Yes. Where is	the property?								
1.1	44000 4574			What	is the property	? Check all that apply				
	44322 157t	n St. available, or other des	ecription		Single-family I	home				r exemptions. Put ns on Schedule D:
	Officer address, ii	available, or other des	scription		Duplex or mul	ŭ				cured by Property.
					Condominium	or cooperative				
					Manufactured	or mobile home	•			
	Florence	SD	57235-0000		Land		Current va entire prop			rent value of the tion you own?
	City	State	ZIP Code		Investment pro	operty	\$23	30,000.00		\$230,000.00
					Timeshare		Describe t	he nature of v	our ov	wnership interest
					Other		(such as fe	ee simple, ten		by the entireties, or
				Who		t in the property? Check one	a ille estat	e), if known.		
	Codington				•					
	County			_	Debtor 1 and	Debtor 2 only				
	. ,			_		f the debtors and another		t if this is com	munit	ty property
						ou wish to add about this ite	,	,		
				prope	erty identificati	on number:				
				Mor	taaae on fai	rm land				

Official Form 106A/B Schedule A/B: Property page 1

Debtoi		nawn Michelle Moe			Case	number (if known)	
	f you ow	n or have more tha	n one, list h				
_	20 Hoyt	St. W. s, if available, or other description	on	What	is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
c	Carthage ity Kingsbul	State	<b>7323-0000</b> ZIP Code	□ □ □ Other	Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this itererty identification number:	(such as fee simple, a life estate), if know  Check if this is of (see instructions)	of your ownership interest tenancy by the entireties, or
o you	Describe a own, lea	e Your Vehicles ase, or have legal or e	quitable inter	<b>est in a</b> rt it on S	ny vehicles, whether they are registere Schedule G: Executory Contracts and Une	ed or not? Include an	y vehicles you own that
□и	lo						
<b>■</b> Y	es						
	Make: Model:	GMC Yukon		Debtor 1	•	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
Г	Year: Approxima Other info	ate illicage.	00000		2 only 1 and Debtor 2 only one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
				Check i	f this is community property ructions)	\$16,488.00	\$16,488.00
	Make: Model:	Harley Davidson Roadglide		<b>ho has a</b> Debtor 1	n interest in the property? Check one	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
	Year: Approxima Other info		13000		2 only 1 and Debtor 2 only one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
					f this is community property	\$18,500.0	0 \$18,500.00

Official Form 106A/B Schedule A/B: Property page 2

**Jason Theodore Moe** Debtor 1 Debtor 2 **Shawn Michelle Moe** Case number (if known)

■ Yes				
4.1 Make:	Polais	Who has an interest in the property? Check one	Do not deduct secure	ed claims or exemptions. Put
Model:	Ranger	☐ Debtor 1 only	the amount of any see	cured claims on Schedule D: Claims Secured by Property.
Year:	2016	Debtor 2 only	Current value of the	Current value of the
		■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other inf	ormation:	At least one of the debtors and another  Check if this is community property (see instructions)	\$11,550.00	\$11,550.00
art 3: Descri	be Your Personal and House or have any legal or equita goods and furnishings Major appliances, furniture, scribe	ble interest in any of the following items?		\$46,538.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
Examples:	Televisions and radios; aud	io, video, stereo, and digital equipment; computers, printe	rs, scanners; music colle	ections; electronic devices
Examples:	Televisions and radios; aud including cell phones, came		rs, scanners; music colle	ections; electronic devices
Examples:	Televisions and radios; aud including cell phones, came scribe		rs, scanners; music colle	
Examples:  ☐ No ☐ Yes. De  Collectibles Examples:	Televisions and radios; aud including cell phones, came scribe  2 TV, Desk of value Antiques and figurines; pain other collections, memorabile	computer  tings, prints, or other artwork; books, pictures, or other ar		\$75.00
Examples:  ☐ No ☐ Yes. De  Collectibles Examples: ☐ No ☐ Yes. De  Equipment Examples:	Televisions and radios; aud including cell phones, came scribe  2 TV, Desk of value Antiques and figurines; pain other collections, memorabinscribe  for sports and hobbies	computer  tings, prints, or other artwork; books, pictures, or other ar	t objects; stamp, coin, or	\$75.00 states and collections;
Examples:  ☐ No ☐ Yes. De  Collectibles Examples: ☐ No ☐ Yes. De  Equipment Examples:	Televisions and radios; aud including cell phones, came scribe  2 TV, Desk of value Antiques and figurines; pain other collections, memorabilistribe  for sports and hobbies Sports, photographic, exercimusical instruments	tings, prints, or other artwork; books, pictures, or other ar lia, collectibles	t objects; stamp, coin, or	\$75.00 states and collections;

Official Form 106A/B Schedule A/B: Property page 3

Yes. Describe.....

		ason Theod hawn Miche					Case number (if known	n)
			Persoi	nal Clothing				\$250.00
	Jewelry Examples ■ No □ Yes. De		elry, cos	tume jewelry, en	gagement rii	ngs, wedding rings, heirld	oom jewelry, watches, gems	, gold, silver
	Non-farm Examples ■ No □ Yes. De	: Dogs, cats, b	irds, hor	ses				
	□ No	personal and			id not alrea	dy list, including any h	ealth aids you did not list	
				machine				\$25.00
15			•			luding any entries for p	ages you have attached	\$600.00
		be Your Financ or have any le		s quitable interest	in any of th	ne following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			ur wallet, in your			hand when you file your pet	
							Cash	\$15.00
	Deposits Examples  □ No ■ Yes	: Checking, sa institutions. If			nts with the	tificates of deposit; share same institution, list each stitution name:	es in credit unions, brokerage n.	e houses, and other similar
			17.1.	Checking	Pe	eople's State Bank		\$750.00
			17.2.	Checking	PI	ains Commerce Ban	k	\$30.00
		: Bond funds, i	nvestme	ly traded stocks nt accounts with	brokerage fi	rms, money market acco	unts	
19.	Non-publi joint vent	cly traded sto				nd unincorporated busi	nesses, including an inter	est in an LLC, partnership, and
	■ No □ Yes. Gi	ve specific info		about themne of entity:			% of ownership:	

Official Form 106A/B Schedule A/B: Property page 4

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 14 of 46 Jason Theodore Moe Debtor 1 Debtor 2 **Shawn Michelle Moe** Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **IRA** People's State Bank \$3.000.00 **IRA American Funds** \$28,000.00 **IRA American Funds** \$8,600.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

#### 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 15 of 46 Jason Theodore Moe Debtor 1 Debtor 2 **Shawn Michelle Moe** Case number (if known) 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2015 IRS Refund \$2,300.00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: MetLife Promise Whole Life- Jason \$1.436.36 MetLIfe 20 Year Term-Jason \$0.00 **Midland National Life** \$13,037.00 MetLife Promise Whole Life- Shawn \$1.697.91 MetLife 20 Year Term-Shawn \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim.......

#### 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

#### 35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

Deb Deb			Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here			\$58,866.27
Part	5: Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. <b>[</b>	Oo you own or have any legal or equitable interest in any farm-	- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	Oo you have other property of any kind you did not already list	1?		
	Examples: Season tickets, country club membership			
_	No			
L	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$235,500.00
56.	Part 2: Total vehicles, line 5	\$46,538.00	_	
57.	Part 3: Total personal and household items, line 15	\$600.00		
58.	Part 4: Total financial assets, line 36	\$58,866.27		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$106,004.27	Copy personal property total	\$106,004.27
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$341,504.27

Official Form 106A/B Schedule A/B: Property page 7

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 17 of 46

Fill in this infor	rmation to identify your ca	se:		
Debtor 1	Jason Theodore Mo	oe		
	First Name	Middle Name	Last Name	
Debtor 2	Shawn Michelle Mo	e		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	DAKOTA	
Case number (if known)				☐ Check if this is an

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Id	entify the	Property	/ You C	Claim as	Exemp	١t
------------	------------	----------	---------	----------	-------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
3 Beds, Dressers, Sofa, Kitchen set, Line from <i>Schedule A/B</i> : <b>6.1</b>	\$250.00		\$250.00	S.D. Codified Laws § 43-45-4	
Ellie Holli Schedule A/D. 4.1			100% of fair market value, up to any applicable statutory limit		
2 TV, Desk Computer Line from Schedule A/B: 7.1	\$75.00		\$75.00	S.D. Codified Laws § 43-45-4	
Life Hotti Schedule AVD. 7.1			100% of fair market value, up to any applicable statutory limit		
Personal Clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	S.D. Codified Laws § 43-45-2(5)	
Ente from Genedate AVB.			100% of fair market value, up to any applicable statutory limit	10 10 2(0)	
CPAP machine Line from Schedule A/B: 14.1	\$25.00		\$25.00	S.D. Codified Laws § 43-45-2(8)	
Ente from Genedate AVD. 14.1			100% of fair market value, up to any applicable statutory limit	40 40 2(0)	
Cash Line from Schedule A/B: 16.1	\$15.00		\$15.00	S.D. Codified Laws § 43-45-4	
Line from Schedule A/B. 10.1			100% of fair market value, up to		

	btor 1 btor 2	Jason Theodore Moe Shawn Michelle Moe			Case number (if known)	
Brief Sche		description of the property and line on fulle A/B that lists this property	of the property and line on Current value of the Amount of the exemption you claim at lists this property portion you own		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		king: People's State Bank	\$750.00		\$750.00	S.D. Codified Laws § 43-45-4
					100% of fair market value, up to any applicable statutory limit	
		cking: Plains Commerce Bank	\$30.00		\$30.00	S.D. Codified Laws § 43-45-4
					100% of fair market value, up to any applicable statutory limit	
		People's State Bank	\$3,000.00		\$3,000.00	S.D. Codified Laws § 43-45-16
					100% of fair market value, up to any applicable statutory limit	
		American Funds	\$28,000.00		\$28,000.00	S.D. Codified Laws § 43-45-16
				100% of fair market value, up to any applicable statutory limit		
		American Funds rom Schedule A/B: 21.3	\$8,600.00		\$8,600.00	S.D. Codified Laws § 43-45-16
					100% of fair market value, up to any applicable statutory limit	
		ral: 2015 IRS Refund	\$2,300.00		\$2,300.00	S.D. Codified Laws § 43-45-4
	Lino	ioni concadie / v.b. = 011			100% of fair market value, up to any applicable statutory limit	
		ife Promise Whole Life- Jason	\$1,436.36		\$1,436.36	S.D. Codified Laws § 58-12-4
					100% of fair market value, up to any applicable statutory limit	
		and National Life rom Schedule A/B: 31.3	\$13,037.00		\$13,037.00	S.D. Codified Laws § 58-12-4
					100% of fair market value, up to any applicable statutory limit	
		ife Promise Whole Life- Shawn	\$1,697.91		\$1,697.91	S.D. Codified Laws § 58-12-4
	20	ioni concadio / v.z. c · · ·			100% of fair market value, up to any applicable statutory limit	
3.	(Subj	ou claiming a homestead exemption ect to adjustment on 4/01/19 and every			iled on or after the date of adjustmer	nt.)
	_	No ∕es. Did you acquire the property cover	ed by the exemption wi	ithin 1	215 days before you filed this case?	)
		Tes. Did you acquire the property cover  ☐ No	ca by the exemption w	14 III I	,210 days before you filed this case	•
	I	☐ Yes				

Fill in this information	to identify you	r case:				
Debtor 1 Jas	son Theodore	Moe				
	Name	Middle Name	Last Name	_		
_	awn Michelle Name	Moe Middle Name	Last Name			
( , , , , , , , , , , , , , , , , , , ,						
United States Bankrupto	cy Court for the:	DISTRICT OF SOUTH D	AKOTA			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form 106	2D					
•						
Schedule D: 0	Creditors	Who Have Clair	ns Secure	ed by Property		12/15
is needed, copy the Additi		f two married people are filing out, number the entries, and att				
number (if known).  1. Do any creditors have c	laima aggurad by	vour proporty?				
	•		othor ochodulos	Vau hava nathing also to	ronart on this farm	
_		is form to the court with your	other schedules.	You have nothing else to	report on this form.	
Yes. Fill in all of t	the information b	pelow.				
Part 1: List All Secu	red Claims					
		nore than one secured claim, list			Column B	Column C
		a particular claim, list the other c al order according to the creditor		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 CNH Capital		Describe the property that se	curse the claim:	value of collateral. \$26,032.10	\$15,000.00	If any \$11,032.10
Creditor's Name		IH Puma Tractor	cures trie ciairii.	<u> </u>	\$15,000.00	\$11,032.10
		IIII ama madioi				
PO Box 3600		As of the date you file, the cla	im is: Chask all that			
Lancaster, PA		apply.	IIII IS. Check all that			
17604-3600		Contingent				
Number, Street, City, Sta	ate & Zip Code	Unliquidated				
Who owes the debt? Ch	eck one	☐ Disputed  Nature of lien. Check all that a	annly			
Debtor 1 only		☐ An agreement you made (su		ecured		
Debtor 2 only		car loan)				
■ Debtor 1 and Debtor 2 of	only	☐ Statutory lien (such as tax lie	en, mechanic's lien)			
☐ At least one of the debte	ors and another	☐ Judgment lien from a lawsui	t			
☐ Check if this claim rela	ates to a	☐ Other (including a right to of	fset)			
community debt						
Date debt was incurred		Last 4 digits of accoun	t number			
2.2 Farm Services Creditor's Name		Describe the property that se	cures the claim:	\$26,778.00	\$25,000.00	\$1,778.00
Creditor's Name		Bin and Shed				
810 Jensen Ave	e.	As of the date you file, the cla apply.	im is: Check all that			
Watertown, SD	57201	Contingent				
Number, Street, City, Sta	ate & Zip Code	☐ Unliquidated				
Wha amar the debto of		Disputed				
Who owes the debt? Ch	ieck one.	Nature of lien. Check all that a		a a ura d		
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (su car loan)	ich as mortgage or s	ecurea		
■ Debtor 1 and Debtor 2 of	only	☐ Statutory lien (such as tax lie	en, mechanic's lien)			
☐ At least one of the debte	=	☐ Judgment lien from a lawsui	•			
☐ Check if this claim rela		Other (including a right to of				
community debt		(o.aag a right to of				
Date deht was incurred		Last 4 digits of accoun	t number			

Debtor 1 Jason Theodore Moe		Case number (if know)		
First Name Middle N Debtor 2 Shawn Michelle Moe	lame Last Name			
First Name Middle N	lame Last Name			
Double Baside as One die	Book the decree of the decree of the decree	<b>\$0.00</b>	<b>*</b> 0.00	<b>*</b> 0.00
2.3 Harley Davidson Credit  Creditor's Name	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00
	As of the date you file, the claim is: Check all that			
3850 Arrowhead Drive Carson City, NV 89706	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, Oily, State & Zip Gode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt	Other (including a right to onset)			
Date debt was incurred	Last 4 digits of account number			
		404 000 00	<b>*</b> 40 <b>500</b> 00	<b>*** *** ***</b>
2.4 Harley Davidson Credit  Creditor's Name	Describe the property that secures the claim:  2013 Harley Davidson Roadglide	\$21,000.00	\$18,500.00	\$2,500.00
ordand, o riamo	13000 miles			
3850 Arrowhead Drive	As of the date you file, the claim is: Check all that			
Carson City, NV 89706	apply.  ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
■ Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.5 John Deere Financial	Describe the property that secures the claim:	\$28,266.29	\$0.00	\$28,266.29
Creditor's Name				
PO Box 6600	As of the date you file, the claim is: Check all that apply.			
Johnston, IA 50131	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or s	oourod		
Debtor 2 only	car loan)	eculeu		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 7477			
Peoples State Bank of		#22F 202 22	£220.000.00	ΦE 000 00
Florence	Describe the property that secures the claim:	\$235,000.00	\$230,000.00	\$5,000.00

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Jason Theodore Moe		Case number (if know)		
First Name Middle N Debtor 2 Shawn Michelle Moe	lame Last Name			
First Name Middle N	lame Last Name			
Creditor's Name	44322 157th St. Florence, SD 57235 Codington County Mortgage on farm land			
218 Main Avfe.	As of the date you file, the claim is: Check all that apply.			
Florence, SD 57235	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	accured		
Debtor 2 only	car loan)	secureu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
Peoples State Bank of				
Florence	Describe the property that secures the claim:	\$12,500.00	\$16,488.00	\$0.00
Creditor's Name	2012 GMC Yukon 100000 miles			
218 Main Avfe.	As of the date you file, the claim is: Check all that	l		
Florence, SD 57235	apply.  ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt	Other (including a right to onset)			
Date debt was incurred	Last 4 digits of account number			
	<del>-</del>			
2.8 Shefflield Financial	Describe the property that secures the claim:	\$14,257.00	\$11,550.00	\$2,707.00
Creditor's Name	2016 Polais Ranger			
PO Box 580229	As of the date you file, the claim is: Check all that	ı		
Charlotte, NC 28258	apply.  ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 2300	)		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$363,833.39

Debtor	1 Jason Theor	dore Moe		Case number (if know)				
	First Name	Middle Name	Last Name					
Debtor	2 Shawn Mich	elle Moe						
	First Name	Middle Name	Last Name					
Write	f this is the last page of your form, add the dollar value totals from all pages.  Write that number here:  \$363,833.39  Int 2: List Others to Be Notified for a Debt That You Already Listed							
trying to	o collect from you for e creditor for any o	or a debt you owe to someor	ne else, list the creditor in Pa	t that you already listed in Part 1. For example, if a collection agency is t 1, and then list the collection agency here. Similarly, if you have more litors here. If you do not have additional persons to be notified for any				
l I	Name, Number, Stree Roger Damgaar PO Box 5027 Sioux Falls, SD			On which line in Part 1 did you enter the creditor?				

	Case. 10-	10129 Docume	:nt. 1 Filed. 09/14/10	Page 23 01 46	
Fill in this i	information to identify your	case:			
Debtor 1	Jason Theodore I	Moe Middle Name	Last Name		
Debtor 2	Shawn Michelle N	loe			
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF SOUTH I	DAKOTA		
Case numb	er				Observator (California
(II KIIOWII)					Check if this is an amended filing
Official F	Form 106E/F				
	le E/F: Creditors W	ho Have Unsecu	ured Claims		12/15
Schedule G: Schedule D: Genedule D: Genedu	Executory Contracts and Unexp Creditors Who Have Claims Sec	ired Leases (Official Form 1 ured by Property. If more sp e. If you have no informatio	<ul> <li>Also list executory contracts on \$106G). Do not include any creditors pace is needed, copy the Part you ron to report in a Part, do not file that</li> </ul>	s with partially secured claim need, fill it out, number the e	s that are listed in ntries in the boxes on the
1. Do any o	creditors have priority unsecure	d claims against you?			
■ No. G	Go to Part 2.				
☐ Yes.					
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any o	creditors have nonpriority unsec	ured claims against you?			
☐ No. Y	ou have nothing to report in this p	art. Submit this form to the co	ourt with your other schedules.		
Yes.					
unsecure	ed claim, list the creditor separately	/ for each claim. For each clai	der of the creditor who holds each of the creditor what type of claim it all fyou have more than three nonpriors.	is. Do not list claims already in	ncluded in Part 1. If more
					Total claim
	esian Seed Service	Last 4 digits	s of account number		\$0.00
413	345 235th St.	When was t	the debt incurred?		_
	resian, SD 57314 hber Street City State Zlp Code	As of the da	ate you file, the claim is: Check all the	nat annly	
	o incurred the debt? Check one.	7.0 0	no you me, me elam let encok an a	ас арргу	
	Debtor 1 only	☐ Continge	ent		
	Debtor 2 only	☐ Unliquida			
■ (	Debtor 1 and Debtor 2 only	□ Disputed			
	At least one of the debtors and and	_ `	NPRIORITY unsecured claim:		
	Check if this claim is for a comr	nunity	loans		
deb		<u> </u>	ons arising out of a separation agreem fority claims	nent or divorce that you did not	
<b>■</b> 1	No	☐ Debts to	pension or profit-sharing plans, and o	other similar debts	
	Yes	Other. Sp	pecify		

	Shawn Michelle Moe	Case number (if know)	
4.2	Aurora Cooperative	Last 4 digits of account number	\$305.39
	PO Box 209	When was the debt incurred?	
	Aurora Cooperative Idorpronity Creditor's Name O Box 209 Aurora, NE 68818 Aurora Street City State Zip Code Mho incurred the debt? Check one.  Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Cooperative As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Mho mass the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Mho incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Bett one of the debtors and another Check if this claim is for a community Bett one of the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Cooperative Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 5 and Debtor 5 only Debtor 6 and Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 and Debtor 9 only Debtor 9 and Debtor 9 only Debtor 1 only Debtor 9 and Debtor 9 only Debtor 1 only De		
	Who incurred the debt? Check one.		
	Aurora Cooperative Nonpriority Creditor's Name PO Box 209 Aurora, NE 68818 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Channel Nonpriority Creditor's Name PO Box 204092 Number Street City State Zip Code Who incurred the debt?  Channel No Debtor 1 and Debtor 2 only Debtor 1 sharing plans, and other similar debts Debtor 1 only Debtor 2 only Nonpriority Creditor's Name PO Box 204092 Number Street City State Zip Code Who incurred the debtors and another Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset?  Student loans Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Check if this claim is for a community debt State Claim subject to offset?  Other. Specify  As of the date you file, the claim is: Check all that apply When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply When was the debt incurred?  As of the date you file, the claim is: Check all that apply When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Disputed  Type of NoNPRIORITY unsecured claim: Disputed Disputed  Disputed  Type of NoNPRIORITY unsecured claim: Disputed  Disputed  Type of NoNPRIORITY unsecured claim: Disputed  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Contingent Disputed  Other. Specify  Citibank Nonpriority Creditor's Name PO Box 183037  Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed  Disputed		
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
4.3		Last 4 digits of account number	\$0.00
	PO Box 204092	When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply	
		no of the date you me, the stain to offeet an that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only		
		•	
	_	<u></u>	
	•		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	
4.4		Last 4 digits of account number 7288	\$10,000.00
		When was the debt incurred?	
		- As file has a file decision of the file	
	•	As of the date you file, the claim is: Check all that apply	
	_		
		_	
	<u> </u>	'	
	<u> </u>	•	
	At least one of the debtors and another		
	☐ Check if this claim is for a community		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	

	Shawn Michelle Moe	Case number (if know)					
4.5	Dan Scott	Last 4 digits of account number	Unknown				
	Nonpriority Creditor's Name 41873 235th St. Fedora, SD 57337	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Lawsuit					
4.6	Plains Commerce Bank	Last 4 digits of account number	\$0.00				
	Nonpriority Creditor's Name 109 First Ave. SE Watertown, SD 57201	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	,					
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?						
	■ No						
	Yes	■ Other. Specify Ready Reserve					
4.7	Wells Fargo	Last 4 digits of account number 8085	\$21,000.00				
	Nonpriority Creditor's Name PO Box 10347 Pos Mainos IA 50306	When was the debt incurred?					
	Des Moines, IA 50306  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Cother. Specify Ready Reserve  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated					
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset? report as priority claims						
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit Card					

		neodore Moe lichelle Moe		Case n	number (if know)		
	Vhetstone		Last 4 digits of account number				\$0.00
1	lonpriority Cre 3639 466tI Vilmot. SD	h Ave.	When was the debt incurred?				
		City State Zlp Code	As of the date you file, the claim	is: Check	call that apply		
V	Vho incurred	the debt? Check one.					
[	Debtor 1 on	ly	☐ Contingent				
[	Debtor 2 on	lly	☐ Unliquidated				
I	Debtor 1 an	d Debtor 2 only	☐ Disputed				
Γ	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
_	_	is claim is for a community	☐ Student loans				
c	ebt	ibject to offset?	☐ Obligations arising out of a separeport as priority claims	aration ag	reement or divor	ce that you did not	
ı	No		Debts to pension or profit-sharing	ng plans,	and other similar	debts	
[	☐ Yes		■ Other. Specify Supplies				
Part 3:	List Other	s to Be Notified About a Deb	ot That You Already Listed				
is trying have monotified Part 4:	to collect from the than one of for any debts  Add the A	om you for a debt you owe to so creditor for any of the debts that in Parts 1 or 2, do not fill out or mounts for Each Type of Un certain types of unsecured clain	. 5	n Parts 1 itional cr	or 2, then list th editors here. If y	e collection agency here. Simi rou do not have additional pers	larly, if you sons to be
7,					Tot	al Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
To clai	tal	,				0.00	
from Pai		Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal i	njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a thro	ugh 6d.	6e.	\$	0.00	
						.1.01.1	
	6f.				101	al Claim	
		Student loans		6f.	\$	0,00	
clai				6f.	\$	0.00	
	ms		eparation agreement or divorce that	6f. 6g.	\$ \$	0.00	

6j.

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

31,305.39

31,305.39

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 27 of 46

Fill in this infor	mation to identify your	case:		
Debtor 1	Jason Theodore	Мое		
	First Name	Middle Name	Last Name	
Debtor 2	Shawn Michelle N	Лое		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH I	DAKOTA	
Case number				
(if known)		-		

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

rson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code  Crysler Capital PO Box 961275 Ft. Worth, TX 76161-0275  Dave Lowe 17403 452nd Ave.	State what the contract or lease is for  Lease of daughters pickup. Daughter makes the payments
PO Box 961275 Ft. Worth, TX 76161-0275 Dave Lowe	payments
	Cron Veer 2016 Sublement to Silver Lake Colony
Watertown, SD 57201	Crop Year 2016, Subleased to Silver Lake Colony
Elizabeth Petrich PO Box 74 La Salle, MN 56056	Crop Year 2016, Subleased to Travis Voeltz
Harlan Johnson 217 19th St. SE Apt 4 Watertown, SD 57201	Crop Year 2016, Subleased to Silver Lake Colony
Jayson Borns 14444 Kipling Ave. S. Savage, MN 55378	Crop Year 2016, Subleased to Silver Lake Colony
Miner County Treasurer 401 N. Main Howard, SD 57349	Crop Year 2016, Subleased to Javen Moe
Morris Trust 47483 Spruce Circle Dell Rapids, SD 57022	Crop Year 2016, Subleased to Travis Voeltz
Pat Maroney 501 S. Arthur St. Howard, SD 57349	Crop Year 2016, Subleased to Javen Moe
	PO Box 74 La Salle, MN 56056  Harlan Johnson 217 19th St. SE Apt 4 Watertown, SD 57201  Jayson Borns 14444 Kipling Ave. S. Savage, MN 55378  Miner County Treasurer 401 N. Main Howard, SD 57349  Morris Trust 47483 Spruce Circle Dell Rapids, SD 57022  Pat Maroney 501 S. Arthur St.

Debtor 1 Jason Theodore Moe Debtor 2 Shawn Michelle Moe

Case number (if known)



# Additional Page if You Have More Contracts or Leases

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.9	Roger Hanson 384 S. Lake Drive Arlington, SD 57212	Crop year of 2016. Subleased to Silver Lake Colony
2.10	Wells Fargo Leasing PO Box 6434 Carol Stream, IL 60197	Lease of Building

Fill in this i	nformation to identify you	ur case:			
Debtor 1	Jason Theodor	е Мое			
<b>D</b> 1 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Shawn Michelle First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the	: DISTRICT OF SOUT	H DAKOTA		
Case numb	er				
(if known)				☐ Check if this is amended filing	
Official	Form 106H				
	ule H: Your Co	debtors			12/15
ocnea	dic II. Tour oo	debtor 3			12/13
fill it out, an your name a	d number the entries in the and case number (if know	ne boxes on the left. Att n). Answer every quest	ach the Additional Page to ton.	n. If more space is needed, copy the Addition his page. On the top of any Additional Page	
1. Do y	ou have any codebtors? (	(If you are filing a joint cas	e, do not list either spouse as	s a codebtor.	
■ No □ Yes					
			property state or territory? Puerto Rico, Texas, Washing	(Community property states and territories inclipton, and Wisconsin.)	ude
_				,	
	Go to line 3.	ougo or logal oquivalent	live with you at the time?		
□ res.	Did your spouse, former sp	bouse, or legal equivalent	live with you at the time?		
in line 2 Form 1	2 again as a codebtor only	y if that person is a gua	rantor or cosigner. Make su	your spouse is filing with you. List the person re you have listed the creditor on Schedule I b). Use Schedule D, Schedule E/F, or Schedu	D (Official
	Column 1: Your codebtor ame, Number, Street, City, State and	d ZIP Code		Column 2: The creditor to whom you owe to Check all schedules that apply:	the debt
3.1				☐ Schedule D, line	
	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	lumber Street	_			
C	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	lumber Street	_			
С	iity	State	ZIP Code		

EIII	in this information to identify your o	raco.				1			
	btor 1 Jason Theo								
	btor 2 Shawn Mich	nelle Moe			_				
Uni	ited States Bankruptcy Court for the	e: DISTRICT OF SOUTH	I DAKOTA						
	se number nown)						d filing ent sho	wing postpetition ne following date:	
<u>O</u>	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment Fill in your employment	ur spouse is not filing wi	th you, do not inclu	ude infor	mati	on about your spo	use. If	more space is	needed,
••	information.		Debtor 1					n-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			■ Emplo □ Not er	•	ed	
	employers.	Occupation	Farm Hand			Bookke	eper		
	Include part-time, seasonal, or self-employed work.	Employer's name	Bronson Custo	m Farm	ing	Peoples	s State	e Bank of Flor	ence
	Occupation may include student or homemaker, if it applies.	Employer's address				218 Mai Florenc			
		How long employed the	nere? 60 Day	/S		6	years	3	
Pai	rt 2: Give Details About Mo	nthly Income							
	imate monthly income as of the duse unless you are separated.	late you file this form. If y	ou have nothing to	report for	any	line, write \$0 in the	space.	. Include your noi	n-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		mbine the information	on for all e	emplo	oyers for that perso	n on th	ne lines below. If	you need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5,460.00	\$	4,058.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	5,460.00	\$	4,058.00	

	tor 1 tor 2	Jason Theodor Shawn Michelle					Case	number ( <i>if kr</i>	nown)			
							For	Debtor 1			Debtor 2 or filing spouse	
	Cop	y line 4 here				4.	\$	5,460	0.00	\$	4,058.00	-
5.	List	all payroll deducti	ions:									
	5a.	Tax, Medicare, a	ınd Social Secur	ity deductions		5a.	\$	708	3.02	\$	103.80	
	5b.	Mandatory conti	ributions for reti	rement plans		5b.	\$	(	0.00	\$	0.00	-
	5c.	Voluntary contri		•		5c.	\$	(	0.00	\$	0.00	- -
	5d.	Required repayr	nents of retirem	ent fund loans		5d.	\$		0.00	\$	0.00	_
	5e.	Insurance				5e.	\$		0.00	\$	719.26	_
	5f.	Domestic suppo	ort obligations			5f.	\$_ \$		0.00	\$	0.00	_
	5g. 5h.	Union dues Other deduction	e Specify:			5g. 5h.+	· · · · · ·		0.00 0.00	\$ + \$	0.00	_
6.			—	5a+5b+5c+5d+5e+5f+5	5a±5h	- <sup>511.</sup> 7 6.	Ψ— \$		3.02	*	823.06	-
7.				Subtract line 6 from line		7.	Ψ— \$			\$		_
					ine 4.	۲.	Ψ	4,751	1.90	Ψ	3,234.94	-
8.	List 8a.	profession, or fa Attach a statement receipts, ordinary	n rental property arm nt for each prope and necessary b	d:  and from operating a  rty and business showir business expenses, and	ng gross							
	01	monthly net incor				8a.	\$		0.00	\$	0.00	-
	8b. 8c.	regularly receive	payments that yes e spousal support,	ou, a non-filing spous child support, maintena	•	8b. 8c.	\$ \$		0.00	\$ \$	0.00	-
	8d.	Unemployment				8d.	\$		0.00	\$	0.00	_
	8e.	Social Security				8e.	\$		0.00	\$	0.00	_
	8f. 8g.	Include cash assi that you receive, Nutrition Assistan Specify: Pension or retire	stance and the v such as food star nce Program) or h ement income	at you regularly receivalue (if known) of any nomps (benefits under the nousing subsidies.	on-cash assistance	_ 8f. _ 8g.	\$ \$	(	0.00	\$ \$	0.00 0.00	-
	8h.	Other monthly if	icome. Specify:	Foster Support		8h.+	*_	1,000	0.00	+ \$	0.00	<u>-</u> _
9.	Add	all other income.	Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.		9.	\$	1,000	0.00	\$	0.0	0
10.		culate monthly inc the entries in line 1		+ line 9. d Debtor 2 or non-filing		0. \$		5,751.98	+ \$_	3,23	34.94	8,986.92
11.	Inclu othe	ude contributions fro er friends or relatives not include any amo	om an unmarried s.	the expenses that yo partner, members of you uded in lines 2-10 or am	ur household, your o	depen	-				chedule J. 11. +\$	0.00
	200	,-								_	Ψ	0.00
12.		e that amount on th		line 10 to the amount is the dules and Statistical							12. \$	8,986.92
13.	Do y	•	ease or decreas	e within the year after	you file this form?	,					Combin monthl	y income
	_	No. Yes. Explain:										
	ш	i co. Expiairi.										

						1			
311	in this informa	ition to identify yo	our case:						
Deb	tor 1	Jason Theod	lore Moe	1		_		f this is:	
Deb	tor 2	Shawn Miche	elle Moe				Α:		ving postpetition chapter
(Spc	ouse, if filing)						13	expenses as of	the following date:
Unite	ed States Bankr	ruptcy Court for the:	DISTRI	CT OF SOUTH DAKOTA			M	M / DD / YYYY	
	e numbe <b>r</b> nown)								
Of	ficial Fo	rm 106J							
Sc	chedule	J: Your I	Exper	nses					12/1
Be a	as complete a	and accurate as	possible eded, atta	. If two married people a ich another sheet to this					
Part		ribe Your House	hold						
1.	Is this a joir  ☐ No. Go to								
	_	es Debtor 2 live i	n a separ	ate household?					
	■ N								
	_ `	-	st file Offici	al Form 106J-2, Expense	s for Separate House	ehold of De	ebtor	2.	
2.	Do you have	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relating Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state	the			_				□ No
	dependents	names.			Son				■ Yes
					Daughter			12	□ No ■ Yes
									□ No
					Daughter			<u>16</u>	Yes
									□ No □ Yes
3.	expenses o	oenses include f people other th d your depender	han <sub>—</sub>	No Yes					
exp app	imate your ex enses as of a licable date.	a date after the b	our bankr pankrupto	uptcy filing date unless y y is filed. If this is a sup	olemental <i>Schedule</i>				
the		h assistance and		government assistance cluded it on Schedule I:				Your expe	enses
4.		or home owners		ses for your residence.	Include first mortgag	e 4.	\$_		0.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		250.00
	4b. Prope	rty, homeowner's				4b.	\$		117.00
		maintenance, re owner's associat	•	upkeep expenses		4c.			100.00
5.				oominium dues our residence, such as ho	ome equity loans	4d. 5.			0.00

ebtor 1	Jason Theod			_		
ebtor 2	Shawn Miche	elle Moe		Jase num	ber (if known)	
Utili	ities:					
6a.	Electricity, heat	, natural gas		6a.	\$	400.00
6b.		arbage collection		6b.		100.00
6c.	, , ,	phone, Internet, satellite, and ca	able services	6c.	\$	175.00
6d.	Other. Specify:	,		6d.		0.00
	od and housekeer	ning supplies		— <del>7</del> .		1,000.00
		en's education costs		8.	\$	100.00
_	thing, laundry, ar			9.		50.00
	sonal care produ	•		10.	·	25.00
	dical and dental e			11.	*	100.00
		de gas, maintenance, bus or tra	in foro	11.	Ψ	100.00
	not include car pay		iiii iaie.	12.	\$	350.00
		s, recreation, newspapers, ma	gazines, and books	13.	\$	75.00
		ons and religious donations	,	14.		20.00
	urance.	g			·	20.00
		nce deducted from your pay or in	ncluded in lines 4 or 20.			
15a	. Life insurance	, , ,		15a.	\$	0.00
15b	. Health insurance	e		15b.	\$	0.00
15c	. Vehicle insuran	ce		15c.	\$	200.00
15d	. Other insurance	e. Specify:		15d.	\$	0.00
		taxes deducted from your pay	or included in lines 4 or 20.	<del></del> >		
	ecify:	7 : 1:00		16.	\$	0.00
Inst	allment or lease	payments:				
	. Car payments f			17a.	\$	230.00
17b	. Car payments f	or Vehicle 2		17b.	\$	0.00
17c	. Other. Specify:	Leased vehicle		17c.	\$	260.00
		Leased vehicle-2		17d.	\$	270.00
	Ranger			_	\$	380.00
Υοι	ır payments of ali	mony, maintenance, and sup	port that you did not report as			
			r Income (Official Form 106I).	18.	\$	0.00
		make to support others who	do not live with you.		\$	0.00
	ecify:			19.		
			4 or 5 of this form or on Sched			
	. Mortgages on o			20a.		0.00
	. Real estate taxe			20b.	·	0.00
		owner's, or renter's insurance		20c.	·	0.00
	•	epair, and upkeep expenses		20d.	· <u> </u>	0.00
		ssociation or condominium dues	S	20e.	*	0.00
Oth	er: Specify: Cu	ılligan		21.	+\$	20.00
TV				_	+\$	130.00
Cel	II Phones			_	+\$	300.00
		hly aynanaa				
	culate your mont	• •			•	4.050.00
	. Add lines 4 throu	•	any from Official Form 100 LC		\$	4,652.00
	,	nthly expenses for Debtor 2), if	**		\$	
22c	. Add line 22a and	22b. The result is your monthly	expenses.		\$	4,652.00
Cal	culate your mont	hly net income.				
	•	our combined monthly income) f	rom Schedule I.	23a.	\$	8,986.92
		thly expenses from line 22c abo		23b.	·	4,652.00
_55	. 55, ,500 111011	, 5.,55556 115111 11110 220 000		200.	¥	7,002.00
230	. Subtract vour m	onthly expenses from your mon	ithly income.			
_00		ur monthly net income.	,	23c.	\$	4,334.92
			penses within the year after you			
			within the year or do you expect your m	nortgage	payment to increas	e or decrease because of a
	lification to the terms	of your mortgage?				
$\Box$	Vec Evn	ain here:				

Fill in this info	rmation to identify your	case:			
Debtor 1	Jason Theodore	Moe			
	First Name	Middle Name	Last Name		
Debtor 2	Shawn Michelle I	Лое			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF SOUTH	DAKOTA		
Case number (if known)				☐ Check if this amended filir	
	<sub>m 106Dec</sub> tion About a	ın Individual	Debtor's Sch	edules	12/15
obtaining mone years, or both.		n connection with a ban		laking a false statement, concealing prop fines up to \$250,000, or imprisonment for	
Did you p	pay or agree to pay some	one who is NOT an atto	rney to help you fill out ban	nkruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer Declaration, and Signature (Official	
	alty of perjury, I declare are true and correct.	that I have read the sum	nmary and schedules filed v	with this declaration and	
X /s/ Ja	son Theodore Moe		X /s/ Shawn Mi	ichelle Moe	
	n Theodore Moe		Shawn Miche		
Signat	cure of Debtor 1		Signature of De	ebtor 2	
Date	September 14, 2016		Date <b>Septer</b>	mber 14, 2016	

Fill i	n this inform	nation to identify you	r case:							
Debt		Jason Theodore								
		First Name	Middle Name	Last Name						
Debt	or 2 se if, filing)	Shawn Michelle First Name	Moe Middle Name	Last Name						
Unite	ed States Bar	nkruptcy Court for the:	DISTRICT OF SOUTH DA	AKOTA						
Case (if know	e number wn)				_	Check if this is an mended filing				
Sta		of Financial	Affairs for Individ			4/16				
inforr	nation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you					
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1. \	What is your	current marital statu	ıs?							
] [	■ Married □ Not mar	ried								
2. [	During the last 3 years, have you lived anywhere other than where you live now?									
	<b>-</b>									
[	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .					
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					ity property state or territory co, Texas, Washington and W					
] [	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Ot	ficial Form 106H).						
Part	2 Explai	n the Sources of You	r Income							
F	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
[ 	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	ast calenda uary 1 to De	r year: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$-1,022,310.00	☐ Wages, commissions, bonuses, tips	\$0.00				
			Operating a business		☐ Operating a business					

Official Form 107

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 36 of 46 Jason Theodore Moe Debtor 1 Debtor 2 **Shawn Michelle Moe** Case number (if known) Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο ☐ Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider

**Total amount** 

paid

Amount you

still owe

**Dates of payment** 

**Insider's Name and Address** 

Reason for this payment Include creditor's name

Case: 16-10129 Document: 1 Filed: 09/14/16 Page 37 of 46 Debtor 1 Jason Theodore Moe Debtor 2 **Shawn Michelle Moe** Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed Value

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Debtor 1	Jason Theodore Moe
Debtor 2	Shawn Michelle Moe

Case number (if known)

Par	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment			
	Access Counseling Los Angeles, CA 90030	Credit Counseli	ng		8-1-16	\$20.00			
	Sutton Law Offices, P.C. PO Box 1053 Watertown, SD 57201				8-1-16	\$2,000.00			
<b>17</b> .	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list.	or to make payments			r transfer any prope	rty to anyone who			
	Yes. Fill in the details.								
	Person Who Was Paid Address	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li  No  Yes. Fill in the details.	iness or financial affa e as security (such as t	i <b>irs?</b> he granting of a se						
	Person Who Received Transfer	Description and v	alue of	Describe a	any property or	Date transfer was			
	Address	property transferr			received or debts	made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No  ☐ Yes. Fill in the details.		y property to a se	lf-settled tru	st or similar device	of which you are a			
	Name of trust	Description and v	Description and value of the property transferre			Date Transfer was			
	name of trast	Description and V	uide of the proper	ty transferre	.u	made			
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units					
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No	other financial accour	nts; certificates of			, ,			
	Yes. Fill in the details.								
		ast 4 digits of ccount number	Type of account instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer			

	otor 1 otor 2	Jason Theodore Moe Shawn Michelle Moe		Case number (if known)				
21.		ou now have, or did you have within 1 year or other valuables?	before you filed for bankruptcy, an	y safe deposit box or other deposito	ory for securities,			
		No						
		Yes. Fill in the details.						
		e of Financial Institution 'ess (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have	you stored property in a storage unit or pl	lace other than your home within 1	year before you filed for bankruptcy	?			
		No						
	_	Yes. Fill in the details.			_			
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Pai	t 9:	Identify Property You Hold or Control for	Someone Else					
23.		ou hold or control any property that someo omeone.	one else owns? Include any propert	y you borrowed from, are storing fo	r, or hold in trust			
	_	No Yes. Fill in the details.						
		er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Pai	t 10:	Give Details About Environmental Informa	ation					
For	the pu	rpose of Part 10, the following definitions	apply:					
	toxic	conmental law means any federal, state, or substances, wastes, or material into the a ations controlling the cleanup of these sul	ir, land, soil, surface water, ground	<del></del>				
		neans any location, facility, or property as rn, operate, or utilize it, including disposal		aw, whether you now own, operate,	or utilize it or used			
		rdous material means anything an environ dous material, pollutant, contaminant, or s		waste, hazardous substance, toxic	substance,			
Rep	ort all	notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.				
24.	Has a	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	_	No Yes. Fill in the details.						
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have	you notified any governmental unit of any	release of hazardous material?					
	_	No Yes. Fill in the details.						
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

	otor 1 Jason Theodore Moe tor 2 Shawn Michelle Moe		Case number (if known)						
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any envi	ronmental law? Include settlements a	nd orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to any	business?					
	■ A sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time or part-time						
	☐ A member of a limited liability comp	oany (LLC) or limited liability partnersh	ip (LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing ex	An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	☐ No. None of the above applies. Go to F	e applies. Go to Part 12.							
	■ Yes. Check all that apply above and fill in the details below for each business.								
	Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	·						
	Moe Farms	Farming	Dates business existed EIN:						
	44322 157th St.	_	From-To						
	Florence, SD 57235	Lisa Boomsma Huron, SD	From-10						
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Inclu	de all financial					
	□ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							
	Peoples State Bank of Florence 218 Main Avfe. Florence, SD 57235								
	Plains Commerce Bank PO Box 7 Eden, SD 57232								

**Farm Services** 

PO Box 6600 Johnston, IA 50131

John Deere Financial

Debtor 1	Jason Theodore Moe		
Debtor 2	Shawn Michelle Moe		Case number (if known)
Part 12:	Sign Below		
are true a with a ba		statement	nd any attachments, and I declare under penalty of perjury that the answers, concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Jaso	n Theodore Moe	/s/ Sh	awn Michelle Moe
Jason T	heodore Moe	Shaw	n Michelle Moe
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date S	eptember 14, 2016	Date	September 14, 2016
Did you a	ttach additional pages to Your Statement of	Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay someone who is not an a	ttorney to	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	ame of Person Attach the Bankruptcy F	Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:					
Debtor 1	Jason Theodore Moe				
Debtor 2 (Spouse, if filing)	Shawn Michelle Moe				
United States B	Bankruptcy Court for the: District of South Dakota				
Case number					

Check	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, but the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colur Debte		 mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and c	ommissio	ons (before all	\$	905.05	\$ 2,029.16
Alimony and maintenance payments. Do not include Column B is filled in.	e paym	ents from	a spouse if	\$	0.00	\$ 0.00
All amounts from any source which are regularly portion or your dependents, including child support rom an unmarried partner, members of your household roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3. Net income from operating a business,	t. Includ d, your pouse	de regular depende only if Col	contributions nts, parents,	\$	0.00	\$ 0.00
profession, or farm	Debto					
oss receipts (before all deductions)	\$_	0.00				
rdinary and necessary operating expenses	-\$	0.00				
Net monthly income from a business, profession, or far	rm \$ _	0.00	Copy here ->	\$	0.00	\$ 0.00
Net income from rental and other real property	Debto	r 1				
Gross receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	Φ.	0.00	Copy here ->	\$	0.00	\$ 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2				Case numbe	er ( <i>if known</i> )			
				Column A Debtor 1		Column B Debtor 2 non-filing	or	
7. <b>l</b> i	nterest, dividends, and royalties			\$	0.00	\$	0.00	
	Inemployment compensation			\$	0.00	\$	0.00	
	On not enter the amount if you contend that the amount Social Security Act. Instead, list it here:	unt received was a ber	nefit under	·		·		
	For you	\$	0.00					
	For your spouse	\$	0.00					
	<b>Pension or retirement income.</b> Do not include any enefit under the Social Security Act.		was a	\$	0.00	\$	0.00	
r d	ncome from all other sources not listed above. So not include any benefits received under the Social eceived as a victim of a war crime, a crime against homestic terrorism. If necessary, list other sources of the below.	al Security Act or paym numanity, or internation	nents nal or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	Calculate your total average monthly income. Add ach column. Then add the total for Column A to the		r \$	905.05	+	2,029.16	= \$	2,934.21
	Determine How to Measure Your Deduction Copy your total average monthly income from line Calculate the marital adjustment. Check one:						\$	2,934.21
	You are not married. Fill in 0 below.							
	You are married and your spouse is filing with y	ou Fill in 0 below						
-	You are married and your spouse is niling with y							
•	Fill in the amount of the income listed in line 11, dependents, such as payment of the spouse's to	Column B, that was N	NOT regula se's suppor	rly paid for to t of someon	he house e other th	hold expense	s of you o ur depend	r your ents.
	Below, specify the basis for excluding this incon adjustments on a separate page.		ncome dev	oted to each	n purpose	e. If necessar	y, list addi	tional
	If this adjustment does not apply, enter 0 below		•					
			_ \$					
			_					
	Total		\$	0.0	0 c	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from	om line 12.					\$	2,934.21
15.	Calculate your current monthly income for the y	ear. Follow these step	ps:					
	15a. Copy line 14 here=>						\$	2,934.21
	Multiply line 15a by 12 (the number of months						X	12
	15b. The result is your current monthly income for	the year for this part of	of the form.				\$	35,210.52

**Jason Theodore Moe** 

Debte		Shaw	vn Michelle Moe		Case number (if known)				
16	. Calo	culate t	the median family income that applies to yo	u. Follow thes	e steps:				
	16a	. Fill in t	the state in which you live.	SD					
	16b	Fill in t	the number of people in your household.	5					
			the median family income for your state and size		d.	¢	88,645.00		
		To find	d a list of applicable median income amounts, ctions for this form. This list may also be availa	go online using	g the link specified in the separate	Ψ.	<u> </u>		
17	. Hov	do th	e lines compare?						
	17a.	. =	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do NC						
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcula</b> your current monthly income from line 14 about	ation of Your					
Par	t 3:	Calc	culate Your Commitment Period Under 11 U	.S.C. § 1325(b	9)(4)				
18.	Сор	y your	total average monthly income from line 11			\$	2,934.21		
19.	cont	end tha	e marital adjustment if it applies. If you are nat calculating the commitment period under 11 icome, copy the amount from line 13.						
	•		marital adjustment does not apply, fill in 0 on li	ne 19a.		-\$	0.00		
	19b.	Subtra	act line 19a from line 18.			\$_	2,934.21		
20.	Cald	Calculate your current monthly income for the year. Follow these steps:							
	20a	Copy	line 19b			\$	2,934.21		
		Multip	ly by 12 (the number of months in a year).				<b>x</b> 12		
	20b.	. The re	esult is your current monthly income for the year	er for this part	of the form	\$	35,210.52		
	20c.	Сору	the median family income for your state and si	ze of househo	ld from line 16c	\$	88,645.00		
	21.	How o							
		■ L	check box 3,	The commitment					
			ine 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ss otherwise o	ordered by the court, on the top of page 1	of this form,	check box 4, The		
Par	t 4:	Sigr	n Below						
	By s	igning	here, under penalty of perjury I declare that the	e information o	on this statement and in any attachments	is true and co	orrect.		
)			n Theodore Moe		X /s/ Shawn Michelle Moe				
			heodore Moe of Debtor 1		Shawn Michelle Moe Signature of Debtor 2				
	_ `	Sep	tember 14, 2016		Date September 14, 2016				
	If vo		/ DD / YYYY ked 17a, do NOT fill out or file Form 122C-2		MM / DD / YYYY				
	-		ked 17a, do NOT fill out or file Form 122C-2.	s form. On line	30 of that form, convivour current month	aly income fro	m line 14 above		

**Jason Theodore Moe** 

Debtor 1

Debtor 2	Shawn Michelle Moe	Case number (if known)	
Debtor 1	Jason Theodore Moe		

# **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 03/01/2016 to 08/31/2016.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Sunny Side Acres and Bronson

Income by Month:

6 Months Ago:	03/2016	\$0.00
5 Months Ago:	04/2016	\$0.00
4 Months Ago:	05/2016	\$0.00
3 Months Ago:	06/2016	\$0.00
2 Months Ago:	07/2016	\$0.00
Last Month:	08/2016	\$5,430.31
	Average per month:	\$905.05

Debtor 1	Jason i neodore Moe		
Debtor 2	Shawn Michelle Moe	Case number (if known)	

# **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 03/01/2016 to 08/31/2016.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: People Bank

Income by Month:

6 Months Ago:	03/2016	\$2,029.16
5 Months Ago:	04/2016	\$2,029.16
4 Months Ago:	05/2016	\$2,029.16
3 Months Ago:	06/2016	\$2,029.16
2 Months Ago:	07/2016	\$2,029.16
Last Month:	08/2016	\$2,029.16
	Average per month:	\$2,029.16